

**STUDENT TUITION ASSISTANCE - SENIOR CITIZENS**



NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ SSN# \_\_\_\_\_

\_\_\_\_\_ DOB \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

**CIRCLE A OR B**

**A.** I hereby certify that I am qualified for free tuition for credit courses under the Senior Citizens Higher Education Act.

To be eligible for free tuition and fees for credit courses, part-time or full-time, a person **MUST** meet the following criteria:

1. Be 60 years of age or older.
2. Be a legal resident of Virginia for one year.
3. Have a taxable income not exceeding \$23,850 for Virginia income tax purposes for the year preceding the year in which enrollment is sought.
4. Be admitted to the college as a student.

**B.** I hereby certify that I am qualified for free tuition and fees for audit\* of credit courses or for taking non-credit courses (not to exceed three courses per semester).

To be eligible, a person **MUST** meet the following criteria:

1. Be 60 years of age or older.
2. Be a legal resident of Virginia for one year.
3. Be admitted to the college as a student.
4. Receive permission from the dean of instruction prior to auditing a course. (An enrollment request form must be submitted to the dean for his approval.)

**SIGNATURE** \_\_\_\_\_

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**FOR OFFICE USE ONLY**

<u>COURSE</u>	<u>CREDIT/AUDIT/NON-CREDIT</u>	<u>TUITION</u>	<u>FEES</u>	<u>TOTAL DUE</u>

AMOUNT COVERED BY AGREEMENT: \$

AMOUNT TO BE PAID BY STUDENT: \$

\*Please see the college catalog for complete information regarding auditing a course.